reby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450, on ____June 9, 2004

(Typed or Printed Name of Person Mailing Paper or Fee)

Application Number: 09/680,599

Confirmation Number: 1833

Applicant

Tanya Parker

: Richard R. Wessman

Filed

: October 6, 2000

TC/A.U.

: 2175

Examiner

: Betit, Jacob F.

: OR00-03802

JUN 2 1 2004

RECEIVED

Docket Number Customer No.

: 22,835

Technology Center 2100

M/S: Box Non-Fee Amendment Commissioner for Patents

P.O. Box 1450

Alexandria VA 22313-1450

AMENDMENT

Sir

In response to the office action of May 20, 2004, please amend the aboveidentified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 11 of this paper.

hat this correspondence is being posited with the U.S. Postal Service with age as first class mail in an envelope addressed to: Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450, on June 9, 2004 Tanya Parker (Typed or Printed Name of Person Mailing Paper or Fee)

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AMENDMENT TRANSMITTAL LETTER

Box Non-Fee Amendment **Assistant Commissioner for Patents** Washington, D.C. 20231

Sir:

In connection with the above-referenced U. S. patent application, transmitted herewith are the following papers:

- Response under 37 C.F.R. § 1.111 to official action mailed May 20, 2004. [x]
- A petition for extension of time is also enclosed with a fee of \$0.00 for a one-month extension for a small entity.
- Terminal disclaimer under 37 C.F. R. § 1.321(c), including []
 - [] check for \$110.00 fee under 37 C.F.R. § 1.20(d), and
 - [] 2 certificates under 37 C.F.R. § 3.73(b).
- Information disclosure statement, form 1449 and ___ references.
- No additional claims fees are required. [x]



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JUN 2 1 2004

Technology Center 2100

An action fee is required, and is calculated as shown below:

	A N	IENDED CL	AI:MS		
ghan Faller on London	NO. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADDT'L FEE
Total Claims		MINUS = 24		x \$\$4 =	\$0
Independent Claims		MINUS = 3	0	x \$84 =	
If Amendment adds mult	iple dependen	t claims, add \$260.00)		
Total Amendment Fee					\$0
If small entity status is cl	aimed, subtrac	et 50% of Total Amer	ndment Fee	,	
TOTAL ADDITIONAL	FEE DUE F	OR THIS AMEND	MENT		\$0

A check in the amount of \$0.00 is enclose
--

[] Charge \$___ to Deposit Account No. ____ (Docket No. ____).

By

[x] Please deduct any <u>underpayments</u>, credit any <u>overpayments</u>, and charge all required <u>extension of time fees</u> to Deposit Account Number 50-1003. (Docket No. OR00-03802).

Edward J. Grundler Park, Vaughan & Fleming LLP 508 Second Street, Suite 201 Davis, CA 95616

Tel: (530) 759-1663 FAX: (530) 759-1665

Respectfully submitted,

Edward J. Grundler

Registration No. 47,615

Date: June 9, 2004